MassHealth All Provider Bulletin 276
May 2018

TO: All Providers Participating in MassHealth

FROM: Daniel Tsai, Assistant Secretary for MassHealth

RE: Member Access to Medication-Assisted Treatment (MAT) Providers and Continuity of Care

Overview

Addiction pharmacotherapy, commonly known as medication-assisted treatment (MAT), is a critical component of MassHealth’s strategy to serve members with an opioid use disorder. MassHealth recognizes the unique nature of MAT and is committed to removing barriers and to supporting members in accessing MAT services.

MassHealth is taking steps to promote access to, and continuity of, MAT services. Specifically, MassHealth has removed the referral requirement for MAT services for members enrolled in the Primary Care Clinician (PCC) Plan and the Primary Care Accountable Care Organization (ACO) plans. Additionally, this bulletin provides information regarding continuity of care for members who transitioned to new ACOs or managed care organizations (MCOs) on March 1, 2018.

Removal of Referral Requirements

MassHealth has removed PCC Plan and Primary Care ACO referral requirements for MAT. This change is effective for MAT services delivered on or after March 19, 2018.

MAT services are defined as services delivered when:

- The provider is a Physician, Physician Assistant, Nurse Practitioner, Community Health Center, Clinical Nurse Specialist, Psychiatric Clinical Nurse Specialist, or Group Practice Organization;
- The claim is for one of the following procedure codes: 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, T1015; and
- The primary diagnosis is for an opioid use disorder (F11 series from ICD-10).

Claims for MAT services delivered to PCC Plan or Primary Care ACO plan members who meet the above criteria may be submitted to MassHealth for payment by the rendering provider without a referral from the members’ PCC or participating primary care provider (PCP). MassHealth encourages MAT providers to continue coordinating and collaborating with the members’ PCC or participating PCP as needed in treating patients.

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Removal of Referral Requirements (cont.)

At this time, Accountable Care Partnership Plans and MCOs also do not require referrals for MAT treatment when rendered by in-network providers. Providers should contact the member’s plan, as indicated in the Eligibility Verification System (EVS) on the date of service, for specific details.

Continuity of Care

Starting March 1, 2018, new ACO and MCO contracts became effective to improve accountability and integration of care for MassHealth members. All members who transitioned to a new plan on March 1, 2018, have a 30-day continuity of care period for medical services, including MAT. In addition to the first 30 days, plans will extend network and prior authorization exceptions through May 31, 2018, providing additional flexibility as members complete their care transitions. More information on this continuity of care period can be found at www.mass.gov/service-details/continuity-of-care.

Primary Care Exclusivity and ACO Service Areas Not a Barrier to MAT

Pursuant to MassHealth’s contracts with ACOs, PCPs who participate exclusively with an ACO may not provide primary care services to members who are not enrolled in that ACO. However, PCPs who also provide MAT services may provide MAT services to members enrolled in any ACO, MCO, or the PCC Plan, without regard to limitations related to primary care exclusivity. This allows PCPs to provide MAT services to members who are not enrolled in the PCP’s ACO or members who live outside the ACO’s service area.

MAT providers must make necessary network and/or payment arrangements with the member’s plan or MassHealth to ensure payment.

MassHealth Website

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Questions

If you have any questions about the information in this bulletin, please contact the MassHealth Customer Service Center at 1-800-841-2900, email your inquiry to providersupport@mahealth.net, or fax your inquiry to 617-988-8974.